



01-27-03

3672/8

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09 882 572 09/882,582	
	Filing Date	06/13/2001	
	First Named Inventor	Philip D. Nguyen	
	Group Art Unit	3672	
	Examiner Name	William P. Neuder	
Total Number of Pages in This Submission	14	Attorney Docket Number	2000-IP-043

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Crutsinger & Booth by Peter V. Schroeder
Signature	
Date	January 24, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as <u>express</u> mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>January 24, 2003</u>			
Typed or printed name	Virginia Born	Date	January 24, 2003
Signature			

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,410

Complete if Known

Application Number	09/882,582
Filing Date	06/13/2001
First Named Inventor	Philip D. Nguyen
Examiner Name	William D. Neuder
Art Unit	3672
Attorney Docket No.	2000-IP-043

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
Account
Number
Deposit
Account
Name

03-3840

Crutsinger & Booth

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	740	2001	370	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	510	2003	255	Plant filing fee	
1004	740	2004	370	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
54	-20** = 22	x 18 =	396
1	-3** = 1	x 84 =	84
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 480

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity

Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051 130		2051 65		Surcharge - late filing fee or oath
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet
1053 130		1053 130		Non-English specification
1812 2,520		1812 2,520		For filing a request for <i>ex parte</i> reexamination
1804 920*		1804 920*		Requesting publication of SIR prior to Examiner action
1805 1,840*		1805 1,840*		Requesting publication of SIR after Examiner action
1251 110		2251 55		Extension for reply within first month
1252 400		2252 200		Extension for reply within second month
1253 920		2253 460		Extension for reply within third month
1254 1,440		2254 720		Extension for reply within fourth month
1255 1,960		2255 980		Extension for reply within fifth month
1401 320		2401 160		Notice of Appeal
1402 320		2402 160		Filing a brief in support of an appeal
1403 280		2403 140		Request for oral hearing
1451 1,510		1451 1,510		Petition to institute a public use proceeding
1452 110		2452 55		Petition to revive - unavoidable
1453 1,280		2453 640		Petition to revive - unintentional
1501 1,280		2501 640		Utility issue fee (or reissue)
1502 460		2502 230		Design issue fee
1503 620		2503 310		Plant issue fee
1460 130		1460 130		Petitions to the Commissioner
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)
1806 180		1806 180		Submission of Information Disclosure Stmt
8021 40		8021 40		Recording each patent assignment per property (times number of properties)
1809 740		2809 370		Filing a submission after final rejection (37 CFR 1.129(a))
1810 740		2810 370		For each additional invention to be examined (37 CFR 1.129(b))
1801 740		2801 370		Request for Continued Examination (RCE)
1802 900		1802 900		Request for expedited examination of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 930

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Peter V. Schroeder	Registration No. (Attorney/Agent)	42,132	Telephone	214-220-0444
Signature		Date	January 24, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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Fee Transmittal FY 2003.max

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U.S. PATENT & TRADEMARK OFFICE
JAN 24 2003

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

2000-IP-043

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	FEE
	\$ _____
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

OR

RATE	FEE
	\$ _____
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	* 54	Minus ** 32	= 22
	Independent (37 CFR 1.16(b))	* 12	Minus *** 11	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI-TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

OR

RATE	ADDI-TIONAL FEE
x \$ 18 =	396
x 84 =	84
+ _____ =	
TOTAL	480

ADDIT. FEE

ADDIT. FEE

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus **	=
	Independent (37 CFR 1.16(b))	*	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI-TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

OR

RATE	ADDI-TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

ADDIT. FEE

ADDIT. FEE

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))	*	Minus **	=
	Independent (37 CFR 1.16(b))	*	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDI-TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

OR

RATE	ADDI-TIONAL FEE
x \$ _____ =	
x _____ =	
+ _____ =	
TOTAL	

ADDIT. FEE

ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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